

CLASS "A" SCHOOL TRAINING REQUEST

INSTRUCTIONS

- A. Complete parts I, II, IV and V for initial request and for changes in school request(s).
B. Complete parts I, III, IV and V for changes due to advancement, transfer or to cancel a request.

PART I. INDIVIDUAL INFORMATION (Completed by applicant)

1. NAME (Last, initials)		2. SOCIAL SECURITY NO.		3. PAYGRADE <input type="checkbox"/> FA <input type="checkbox"/> FN <input type="checkbox"/> SA <input type="checkbox"/> SN <input type="checkbox"/> OTHER		4. SEX <input type="checkbox"/> M <input type="checkbox"/> F	
5. SCHOOL REQUEST(S) (Each will be treated equally)				6. MINORITY CODE DESIGNATION (check one)			
a.	b.	c.	<input type="checkbox"/> BLACK <input type="checkbox"/> HISPANIC <input type="checkbox"/> AMERICAN INDIAN		<input type="checkbox"/> ASIAN <input type="checkbox"/> OTHER (Specify)		
7. STATUS (Have you ever attended Class "A" School?) <input type="checkbox"/> YES <input type="checkbox"/> NO							
8. REMARKS							
9. DATE		10. SIGNATURE					

PART II. UNIT INFORMATION (Completed by Unit Yeoman)

11. UNIT NAME		12. OPFAC		13. LOCATION <input type="checkbox"/> IN CONUS <input type="checkbox"/> OUT CONUS		14. UNIT PHONE NO. FTS COMM ()	
15. QUALIFYING SCORES							
BATTERY TEST SCORES					ASVAB SCORES		
a. GCT	b. ARI	c. MECH	d. ETST	e. CLER	a. GS	b. AR	c. WK
					d. PC	e. NO	f. CS
					g. AS	h. MK	i. MC
					j. EI	k. VE	
16. WAIVER REQUIRED <input type="checkbox"/> YES <input type="checkbox"/> NO		17. FLIGHT PHYSICAL <input type="checkbox"/> NA <input type="checkbox"/> ATTACHED <input type="checkbox"/> ENROUTE		18. HQ. USE		19. DATE REPORTED	
						20. ENLISTMENT EXPIRATION	

PART III. UNIT INFORMATION (Completed by Unit Yeoman)

21. STATUS CHANGE (Provide dates for status change)		<input type="checkbox"/> ADVANCEMENT <input type="checkbox"/> NO LONGER QUALIFIED		<input type="checkbox"/> TRANSFER <input type="checkbox"/> DISCHARGED		<input type="checkbox"/> CANCELLATION <input type="checkbox"/> OTHER (Specify)	
22. REMARKS							

PART IV. CO ENDORSEMENT

23. (check one) <input type="checkbox"/> APPROVED <input type="checkbox"/> DISAPPROVED	
24. REMARKS	
25. DATE	26. SIGNATURE

PART V. DISTRICT ENDORSEMENT

27. (check one) <input type="checkbox"/> FORWARDED <input type="checkbox"/> RETURNED	
28. REMARKS	
29. DATE	30. SIGNATURE
31. UNIT ADDRESS (Completed by Unit Yeoman)	
32. DATE RECEIVED AT HQ.	
33. POSITION ON LIST	
a.	b.
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PRIVACY ACT

In accordance with 5 USC 552a(e). The following information is provided to you when supplying personal information to the U.S. Coast Guard.

1. **AUTHORITY** which authorized the solicitation of the information: 37 USC 403.
2. **PRINCIPAL PURPOSE(S)** for which information is intended to be used: To assist Coast Guard military assignment detailers in personnel management and assignment or re-assignment to Class "A" Training School.
3. **THE ROUTINE USES** which may be made of the information: To add or change personal information pertaining to future re-assignment within the Coast Guard.
4. Whether or not **DISCLOSURE** of such information is mandatory or voluntary (required by law or optional) and the effects on the individual, if any, of not providing all or any part of the requested information: Disclosure of this information is voluntary, but without this information, selection and assignment of personnel applicants to Class "A" Training School could not be achieved.